

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

TEMPORARY FORM D

1430933

OMB APPROVAL

OMB Number: 3235-0076 Expires: October 31, 2008 Estimated average burden hours per response. . . . 4.00

## NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMF ORM BIMITED OF ERING EXEMI	
Name of Offering (  check if this is an amendment and name has changed, and indicate change	e.)
FrontPoint Brookville Credit Opportunities, Ltd.  Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section	on 4(6) ULOE
Type of Filing: New Filing Amendment	(0)
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	
FrontPoint Brookville Credit Opportunities, Ltd.	08063385
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	4
	$\mathcal{A}$
Type of Business Organization	PROCESSED
- * * · · · · · · · · · · · · · · · · ·	please specify):
business trust limited partnership, to be formed	OCT 3 0 2008
Month Year	
Actual or Estimated Date of Incorporation or Organization: Actual	THOMSON REUTERS
CN for Canada; FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS Note: This is a special Temporary Form D (17 CFR 239.500T) that CFR 239.500) only to issuers that file with the Commission a notice on Temporary Form D (17 C notice in paper format on or after September 15, 2008 but before March 16, 2009. During that per initial notice using Form D (17 CFR 239.500) but, if it does, the issuer must file amendments using comply with all the requirements of § 230.503T. Federal:  Who Must File: All issuers making an offering of securities in reliance on an exception under Reguseq. or 15 U.S.C. 77d(6).  When To File: A notice must be filed no later than 15 days after the first sale of securities in the offective sand Exchange Commission (SEC) on the earlier of the date it is received by the SEC at address after the date on which it is due, on the date it was mailed by United States registered or confusion of the file: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20 Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be a photocopy of the manually signed copy or bear typed or printed signatures. Information Required: A new filing must contain all information requested. Amendments need only any changes thereto, the information requested in Part C, and any material changes from the information Fee: There is no federal filing fee.  State:  This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate each state where sales are to be, or have been made. If a state requires the payment of a fee as a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate seems.	CFR 239.500T) or an amendment to such a riod, an issuer also may file in paper format an g Form D (17 CFR 239.500) and otherwise utation D or Section 4(6), 17 CFR 230.501 et offering. A notice is deemed filed with the U.S. the address given below or, if received at that ertified mail to that address.  0549, manually signed. The copy not manually signed by report the name of the issuer and offering, mation previously supplied in Parts A and B.  If or sales of securities in those states that the notice with the Securities Administrator in precondition to the claim for the exemption, a
Appendix to the notice constitutes a part of this notice and must be completed.  ATTENTION	
Failure to file notice in the appropriate states will not result in a loss of the federal ex	•
appropriate federal notice will not result in a loss of an available state exemption unle filing of a federal notice.	ess such exemption is predictated on the

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. General and/or Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Managing Partner Full Name (Last name first, if individual) FrontPoint BCO GP, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 2 Greenwich Plaza, Greenwich CT 06830 Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Promoter Managing Partner Full Name (Last name first, if individual) FrontPoint Partners LLC Business or Residence Address (Number and Street, City, State, Zip Code) 2 Greenwich Plaza, Greenwich CT 06830 Check Box(es) that Apply: Beneficial Owner Executive Officer Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Hagarty, John Business or Residence Address (Number and Street, City, State, Zip Code) 2 Greenwich Plaza, Greenwich CT 06830 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) McKinney, T.A. Business or Residence Address (Number and Street, City, State, Zip Code) 2 Greenwich Plaza, Greenwich CT 06830 Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) The Trustees of Columbia University Business or Residence Address (Number and Street, City, State, Zip Code) 475 Riverside Drive, Suite 401, New York, NY 10115 Check Box(es) that Apply: ☐ Promoter ☐ General and/or Managing Partner Full Name (Last name first, if individual) Somers Dublin Ltd. AC MGKB Business or Residence Address (Number and Street, City, State, Zip Code) Europa House, Harcourt Centre, Harcourt Street Dublin 2, Ireland Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) State Stree Custorial Services (Ireland) Limited ac Axial Systematic Strategies Fund PLC Business or Residence Address (Number and Street, City, State, Zip Code) Block 2, Kilkenny BUsiness and Technology Park, Loughboy Ring Road, Kilkenny, Ireland

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

A. BASIC IDENTIFICATION DATA						
2. Enter the information requested for the following:						
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> </ul>						
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a cl	ass of equity securities of the issuer.					
<ul> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of part</li> </ul>	nership issuers; and					
<ul> <li>Each general and managing partner of partnership issuers.</li> </ul>						
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner					
Full Name (Last name first, if individual)						
Citco Global Custody NV Ref RMF						
Business or Residence Address (Number and Street, City, State, Zip Code)						
Kaya Flamboyan 9, P.O. Box 707, Curacao, Netherlands Antilles						
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner					
Full Name (Last name first, if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)						
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner					
Full Name (Last name first, if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)	•					
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner					
Full Name (Last name first, if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)						
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner					
Full Name (Last name first, if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)						
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner					
Full Name (Last name first, if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)						
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner					
Full Name (Last name first, if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)						
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)						

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount alread sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	<b>c</b> <b>j</b>	
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt		
	Equity	\$_495,269,092	\$ 495,269,092
	Common Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify)	<b>s</b>	<b>s</b>
	Total	§ 495,269,092	§495,269,092
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in thi offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicat the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	e	Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	37	\$ 495,269,092
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		<b>s</b>
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		s
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of th securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure i not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		<b>s</b>
	Printing and Engraving Costs		\$
	Legal Fees		§ 361,508
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		§ 445,000*
	Other Expenses (identify)	<del></del>	\$
	Total		s 806,508

<sup>\*</sup>Represents fees that do not affect the gross proceeds of the issuer and are not used in the calculation of adjusted gross proceeds herin.

L	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS						
	and total expenses furnished in response to Part C-	ering price given in response to Part C — Question 1 — Question 4.a. This difference is the "adjusted gross		\$ 494,907,584			
5.	each of the purposes shown. If the amount for	proceed to the issuer used or proposed to be used for any purpose is not known, furnish an estimate and of the payments listed must equal the adjusted gross art C — Question 4.b above.					
			Payments to Officers, Directors, & Affiliates	Payments to Others			
	Salaries and fees			\$			
	Purchase of real estate	······	\$				
	Purchase, rental or leasing and installation of m and equipment	achinery	\$	. [] \$			
	Construction or leasing of plant buildings and f	acilities	\$				
	Acquisition of other businesses (including the voffering that may be used in exchange for the assuer pursuant to a merger)	value of securities involved in this seets or securities of another	\$	\$			
	Repayment of indebtedness		s	s			
	Working capital		s	s			
	Other (specify): Investment in limited partners	hip interest of affiliated entity	\$	\$ 494,907,584			
			s	s			
	Column Totals		□ \$	\$ 494,907,584			
Total Payments Listed (column totals added)							
		D. FEDERAL SIGNATURE		<u> </u>			
sig	nature constitutes an undertaking by the issuer to f	the undersigned duly authorized person. If this notice furnish to the U.S. Securities and Exchange Commiscoredited investor pursuant to paragraph (b)(2) of	ssion, upon writte				
Iss	er (Print or Type)	Signature	Date				
Fro	ontPoint Brookville Credit Opportunities, Ltd.	1-1/Q/	10/21/	108			
Na	me of Signer (Print or Type)	Title of Signer (Rrint or Type)	• 1				
T.F	a. McKinney	Director of the suer					



## ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)